

Application for Change/Transfer of Water Right

For Ecology Use (Date Stamp)

RECEIVED

FEB 18 2014

Department of Ecology Eastern Regional Office

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION IF FILED WITH THE DEPARTMENT OF ECOLOGY

		FOR OFF	FICIAL USE ONLY
(Check all that apply.)		DATE APPLICATION R	ECEIVED 2-18-2014
Change purpose(s) of use		CHECK NO. 3145	
Add purpose(s) of use		DATE ACCEPTED	
☐ Change point(s) of diversion/withdrawal		CHANGE NO.C 63	052936 @1
X Add point(s) of diversion/withdrawal		COUNTY _ 5006	ane wria 55
Change/transfer place of use		SPECIAL AREA	PP
Other (i.e. consolidation, intertie, trust water)			
Explain:		SEPA: EXEMPT	NOT EXEMPT
LApidii		ECY CODING: 001-002	
			PERMIT NO. 495/
IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)		CERT NO	CERT OF CHG NO.
☐ I have participated in a pre-application cor	nference wi	th Ecology.	
1. Applicant Information	8 8		
APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.
Spokane County Water District No. 3		509-536-0121	509-534-3760
ADDRESS			
1225 N. Yardley Street		OTT 4 TOT	ZIR CORE
CITY		STATE Washington	ZIP CODE 99212-7001
Spokane EMAIL ADDRESS (IF AVAILABLE)		washington	99212-7001
Scwd3@comcast.net			
50 was to content that			
CONTACT (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.
ADDRESS			
CITY		STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)			
LEGAL LAND OWNER or PART OWNER OF PROPOSED PLACE OF	USE	PHONE NO.	FAX NO.
ADDRESS			
CITY	F	STATE	ZIP CODE
EMAIL ADDRESS (IF AVAILABLE)			
2. Water Right Information			
WATER RIGHT OR CLAIM NUMBER	RECORDED		at No. 2 (CCMD2)
3779-A	Spokane	County Water Distri	ct No. 3 (SCWD3)
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO			
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:			
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FI	VE (5) VEARS?	X YES NO	
THE THE WATER DEER FOT TO BENEFICIAL USE IN THE LAST FI	TE (U) TEARS!	A 1150 II NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

3. Point(s) of Diversion/Withdrawal: Add new point of withdrawal to consolidated water right

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Guy/Freya Well	3-4	NW	SE	10	26N	43E	36104.0201	
Dakota Well	3-5	NW	NE	8	26N	43E	36081.0102	
Freya/Farwell Well	3-6	SE	SW	3	26N	43E	36033.0148	
Cherry/Farwell Well	3-7	SW	SW	3	26N	43E	36033.0190	
Guy/Freya Well	3-13	NW	SE	10	26N	43E	36104.0204	
Helena Well	3-14	NW	NW	9	26N	43E	36092.0703	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Guy/Freya Well	3-4	NW	SE	10	26N	43E	36104.0201	
Dakota Well	3-5	NW	NE	8	26N	43E	36081.0102	
Freya/Farwell Well	3-6	SE	SW	3	26N	43E	36033.0148	
Cherry/Farwell Well	3-7	SW	SW	3	26N	43E	36033.0190	
Guy/Freya Well	3-13	NW	SE	10	26N	43E	36104.0204	
Helena Well	3-14	NW	NW	9	26N	43E	36092.0703	
Hawthorne Well	3-15	SE	NW	16	26N	43E	36165.9012	ACH-984

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use: NO CHANGE

EXISTING: X YES NO PROPOSED: X YES NO - IF NO, PROVIDE OWNER(S) NAME:

A. Existing

	CD14 CD2	L CD T FT TT	PERSON OFFICE
PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
D D 1			
B. Proposed			
DIIDDOSE OF USE	CPM or CES	ACRE-ET/VR	PERIOD OF USE

5. Place of Use: NO CHANGE

A. Existing

TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
	TWP.	TWP. RGE.	TWP. RGE. COUNTY	TWP. RGE. COUNTY PARCEL#

R Proposed

D. II	oposeu							_
LEGAL	DESCRIPT	ION OF LAND	S WHERE N	EW USE IS	PROPOSED:			
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES	
DO YOU	J OWN ALL	THE LANDS I	N THE PROP	OSED PLACE	OF USE? YES NO	0		
IF NO, P	ROVIDE OV	VNER(S) NAM	E:					

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?	
X YES \square NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): G3-23578C, 29-A, 3256-A, 6086-A, G3-00949C, &	٢
G3-26510C	

6. Remarks and Other Re				
Guy/Freya Well (3-4) 500 feet so	outh and 320 feet	east of the center of	Section 10	
Dakota Well (3-5) 190 feet south	n and 220 feet east	t of the NW1/4 corne	r of Section 8	
Freya/Farwell Well (3-6) 560 fee				
Cherry/Farwell Well (3-7) 75 fee				3
Guy/Freya Well (3-13) 400 feet		The state of the s		
Helena Well (3-14) 450 feet sour		The state of the s		
Hawthorne Well (3-15) 845 feet	north and 375 fee	t west of the center	of Section 16	
IF FOR SEASONAL OR TEMPORARY, STAR	RT DATE//_	END DATE/	_/	
Certain applications may incur a of Revenue has requested notification with a copy of this request. For five PO Box 47477, Olympia, WA 98	ation of potential ta urther information,	axable water right re, contact: Department	lated actions and	therefore may be provided
7. Signatures:				
I certify that the information about oprocess my application, I he Board access to the above site (application, I understand that all	reby grant staff f s) for inspection o	from the Departmen and monitoring purp	nt of Ecology or poses. If assisted	the County Conservancy d in preparing this above
Ty Wick – General Manager Applicant Printed Name – Title	Applica	ont Signature	b	17 02/24/2014 (Date)
Spokane County Water District 1	No. 2	V		1 1
Water Right Holder Printed Name		Right Holder Signature		(Date)
2		2.3		(=9
				/ /
Land Owner of Existing Place of Use Printed N	lame Land O	wner of Existing Place of Us	e Signature	(Date)
				_ / /
Land Owner of Proposed Place of Use Printed I	Name Land O	wner of Proposed Place of U.	se Signature	(Date)
Please check the region in which the proj	ject is located:			
*Submit your application to:		na Avenue, Suite 200	4601 N.	egional Office Monroe Street
DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611	Yakima, WA (509) 575-24		(509) 329	, WA 99205-1295 9-3400
OLYMPIA, WA 98504-7611	☐ Northwest Re	egional Office	☐ Southwes	t Regional Office
	$3190 - 160^{th}$	Avenue SE	PO Box	47775
		'A 98008-5452	Olympia, (360) 40°	, WA 98504-7775
	(425) 649-70		(300) 40	7-0300
WE ARE RETURNING YOUR A				
☐ APPLICATION FEE NOT	ENCLUSED	☐ MAP NOT INCL		
☐ ADDITIONAL SIGNATUR	ES REQUIRED	☐ SECTION	IS INCOM	PLETE
□ OTHER/EXPLANATION:				
STAFF:		DATE	. / /	